

*I am a University of Michigan pediatric cardiologist who lives and works here in Lansing. I am chairperson of the AHA's state advocacy committee. For the last 20 years I've worked mostly at Sparrow Hospital 1 mile east of here and also at C.S. Mott Children's Hospital in Ann Arbor. I've been on the receiving end for sudden cardiac arrest cases in previously healthy-appearing children. These are cases one never forgets. When it goes well I marvel at how the bystander response comes together in under 5 minutes. I also will never forget hearing about Wes Leonard in 2011 and meeting with other parents over the years after initiation of CPR was delayed. In some cases children survived but were left permanently neurologically-devastated after bystanders waited until emergency medical services arrived. It was EMS that began CPR in the unfortunate cases that I recall. But EMS often doesn't arrive until 10 or more critical minutes elapse. The fact is the brain can only survive for 3–5 minutes without oxygen. This is far less time than it takes EMS to arrive in most cases.*

*Bystander CPR increases survival rates by 2 to 3 times. However, only 1/3 of cardiac arrests receive bystander CPR. It isn't enough to simply "wait until EMS arrives." In every case it wasn't about how soon 9-1-1 was dialed or how soon EMS arrived. It came down to bystander-response time. The best chance for survival from a sudden cardiac arrest at any age is to receive effective bystander CPR until EMS arrives.*

*The way to increase bystander response time is to increase CPR training. Yes, it's important to call 9-1-1 immediately. Yes, 9-1-1 can coach bystanders over a cell phone until EMS arrives. However, bystanders need to be familiar with CPR to have it all come together. These bills are the best way to increase the odds for survival from a sudden cardiac arrest at any age. Schoolchildren serve as multipliers: at home they teach their brothers and sisters, their parents, their grandparents and friends. The time is now.*

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